

July 2015 Medical Deductions:

<u>Single Coverage</u>	BCBS HMO 500	BCBS Options	HNE HMO 500	HNE PPO 500	HNE Wise
Bi-Weekly	\$122.61	\$115.30	\$68.55	\$169.71	\$54.81
Monthly	\$245.22	\$230.60	\$137.10	\$339.42	\$109.62

<u>Family Coverage</u>	BCBS HMO 500	BCBS Options	HNE HMO 500	HNE PPO 500	HNE Wise
Bi-Weekly	\$424.84	\$399.63	\$245.16	\$455.21	\$196.02
Monthly	\$849.68	\$799.26	\$490.32	\$910.42	\$392.04

July 2015 Dental Deductions:

BCBS Dental	Single	Family
Bi-Weekly	\$8.89	\$25.24
Monthly	\$17.78	\$50.48

July 2015 Vision Deductions:

EyeMed	Single	Employee + 1	Family
Monthly	\$5.63	\$10.70	\$15.71